

|               |           |       |                |                     |
|---------------|-----------|-------|----------------|---------------------|
| SERIAL NUMBER | FILE DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
| 09/305,622    | 05/05/99  | 705   | 2761           | 4284-5B1            |

APPLICANT

JEFFREY A. NORRIS, LEXINGTON, SC.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED THIS APPLN IS A CON OF 08/732,584 10/15/96  
 AND A CON OF 08/327,653 10/24/94 ABN  
 AND A CIP OF 08/113,205 08/27/93 ABN

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/09/99 \*\* SMALL ENTITY \*\*

|                              |  |                  |                |              |                    |
|------------------------------|--|------------------|----------------|--------------|--------------------|
| Foreign Priority claimed     | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | SC               | 3              | 44           | 6                  |

Verified and Acknowledged  
 Examiner's Initials Initials

ADDRESS

AUTOMATIC FINANCIAL ACCOUNT PROCESSING SYSTEM

TITLE

|                     |   |   |
|---------------------|---|---|
| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
| \$713               |   |   |